

Supplemental Application Data Sheet

Application Information

<u>Application Number::</u>	<u>10/531,565</u>
<u>International Filing Date::</u>	<u>16/10/03</u>
<u>Application Type::</u>	<u>Regular</u>
<u>Subject Matter::</u>	<u>Utility</u>
<u>Title::</u>	<u>TREATMENT OF HYPERSENSITIVITY</u>
<u>Title::</u>	<u>CONDITIONS</u>
<u>Attorney Docket Number::</u>	<u>38871.34</u>
<u>Request for Early Publication?::</u>	<u>No</u>
<u>Request for Non-Publication?::</u>	<u>No</u>
<u>Suggested Drawing Figure::</u>	<u>[1]</u>
<u>Total Drawings Sheets::</u>	<u>4</u>
<u>Small Entity::</u>	<u>Yes</u>
<u>Secrecy Order in Parent App.?::</u>	<u>No</u>

Applicant Information

<u>Applicant Authority Type::</u>	<u>Inventor</u>
<u>Primary Citizenship Country::</u>	<u>Australian</u>
<u>Status::</u>	<u>Full Capacity</u>
<u>Given Name::</u>	<u>Ian</u>
<u>Middle Name::</u>	<u>Alexander</u>
<u>Family Name::</u>	<u>Shiels</u>
<u>City of Residence::</u>	<u>Muirlea</u>
<u>State or Province of Residence::</u>	<u>Queensland</u>
<u>Country of Residence::</u>	<u>Australia</u>
<u>Street of Mailing Address::</u>	<u>17 Sherlock Road</u>
<u>City of Mailing Address::</u>	<u>Muirlea</u>
<u>Country of Mailing Address::</u>	<u>Australia</u>
<u>Postal or Zip Code of Mailing Address::</u>	<u>4306</u>

Supplemental Application Data Sheet

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Australian
Status:: Full Capacity
Given Name:: Stephen
Middle Name:: Maxwell
Family Name:: Taylor
City of Residence:: Bellbird Park
State or Province of Residence:: Queensland
Country of Residence:: Australia
Street of Mailing Address:: 17 Perdita Street
City of Mailing Address:: Bellbird Park
Country of Mailing Address:: Australia
Postal or Zip Code of Mailing Address:: 4300

Applicant Authority Type:: ~~Inventor~~
Given Name:: ~~David~~
Family Name:: ~~Fairlie~~
City of Residence:: ~~Springwood~~
State or Province of Residence:: ~~Queensland~~
Country of Residence:: ~~Australia~~
Street of Mailing Address:: ~~73 Trevallyan Drive~~
City of Mailing Address:: ~~Fairlie~~
Country of Mailing Address:: ~~Australia~~
Postal or Zip Code of Mailing Address:: ~~4127~~

Correspondence Information

Correspondence Customer Number:: 000027683
Phone Number:: 713-547-2040
Fax Number:: 214-200-0853

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E-Mail Address::

ipdocketing@haynesboone.com

Representative Information

Representative Customer Number::	000027683
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Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
<u>WO</u>	<u>PCT/AU2003/001374</u>	<u>10/16/2003</u>	<u>yes</u>
AU	2002952129	10/17/2002	yes

Assignee Information

Assignee Name::

The University of Queensland

City of Mailing Address::

Brisbane

Country of Mailing Address::

Australia

Postal or Zip Code of Mailing Address:: QLD 4072

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